DT03 Rec'd PCT/PTO 02 DEC 2004
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PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted With Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) OR	Attorney Docket Number	16034US01
	First Named Inventor	Ugur Sahin
	COMPLETE IF KNOWN	
	Application Number	10 506,443
	Filing Date	September 1, 2004
	Art Unit	
Examiner Name		

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Ugur Sahin Philipp von Zabern Platz, 1 55116 Mainz GERMANY

Ozlem Tureci Philipp von Zabern Platz, 1 55116 Mainz GERMANY

Michael Koslowski Rodderweg 24 50999 Koln GERMANY

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 09/01/04 as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

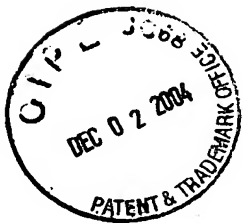
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/EP2003/002556	PCT	03/12/03	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

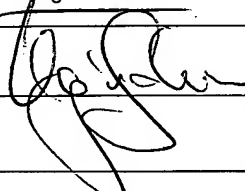
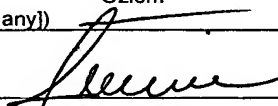
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <u>23446</u> OR <input checked="" type="checkbox"/> Correspondence address below			
Name <u>Troy A. Groetken</u> <u>McAndrews, Held & Malloy</u>			
Address <u>500 West Madison</u> <u>34th Floor</u>			
City <u>Chicago</u>	State <u>IL</u>	ZIP <u>60661</u>	
Country <u>USA</u>	Telephone <u>(312) 775-8000</u>	Fax <u>(312) 775-8100</u>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <u>Ugur</u>		Family Name or Surname <u>Sahin</u> DKX	
Inventor's Signature 		Date <u>2004-10-28</u>	
Residence: City <u>Mainz</u>	State	Country <u>GERMANY</u>	Citizenship <u>Turkey</u>
Mailing Address <u>Philipp von Zabern Platz 1</u>			
City <u>Mainz</u>	State	Zip <u>55131</u>	Country <u>GERMANY</u>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <u>Ozlem</u>		Family Name or Surname <u>Tureci</u>	
Inventor's Signature 		Date <u>2004-10-28</u>	
Residence: City <u>Mainz</u>	State	Country <u>GERMANY</u>	Citizenship <u>German</u> DKX
Mailing Address <u>Philipp von Zabern Platz 1</u>			
City <u>Mainz</u>	State	Zip <u>55116</u>	Country <u>Germany</u>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



PTO/SB/02A (08-03)

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 3 of 3

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael		Koslowski	
Inventor's Signature		Date 2004-10-28	
Residence: City	State	Country	Citizenship
Koln		Germany	German
Mailing Address Rodderweg 24			
Mailing Address			
City	State	ZIP	Country
Koln		50999	Germany
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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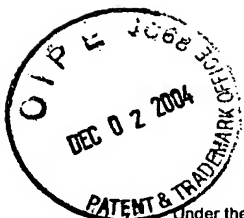
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DECLARATION -- -- Supplemental Priority Data Sheet

Foreign applications:					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/EP2003/002 556	PCT	03/12/03	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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PTO/SB/81 (06-04)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	To be assigned
Filing Date	September 1, 2004
First Named Inventor	Ugur Sahin
Title	GENETIC PRODUCTS DIFFERENTIALLY EXPRESSED IN TUMORS AND USE THEREOF
Art Unit	To be assigned
Examiner Name	To be assigned
Attorney Docket Number	16034US01

I hereby appoint:

☒ Practitioners associated with the Customer
Number:

23446

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Troy A. Groetken				
Address	McAndrews, Held & Malloy				
Address	500 West Madison 34 th Floor				
City	Chicago	State	IL	ZIP	60661
Country	USA				
Telephone	(312) 775-8000	Fax	(312) 775-8100		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	2004-10-28
Name	Ugur Sahin	Telephone	
Title and Company	DR. UNIVERSITY OF MAINE		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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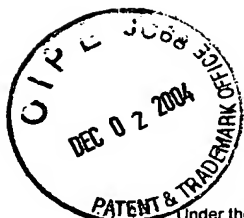
Signature		Date	2004-10-28
Name	Ozlem Tureci	Telephone	
Title and Company	DR. GANYMED PHARMACEUTICALS AG		

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SIGNATURE of Applicant or Assignee of Record

Signature		Date	2004-10-28
Name	Michael Koslowski	Telephone	
Title and Company	DR. UNIVERSITY OF MAINZ		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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